PLEASE TYPE OR PRINT

Ms.	Lynette Marie	Cast Name Last)
Permanent 5618 Address Street	Thornton Dr.	
44129 zip	Tel. (216) 885-06	14
Temporary Address 336 T	Park Ave	Kent
44240 Street	Tel. (216) 673-519	City 5
Zip Permanent address is	in what county?	ahoaa
Born in Cuyahoga Co	unty 🗷 Yes 🗆 No	J
Collaborator(If A	Any)	
If entries are not acce Artist will pick u Museum should o Museum should s	p entries at Museum.	D. at this address:
The attached cord wi	II he returned to you so n	atification of

The attached card will be returned to you as notification of acceptance or rejection by the last week in April.

THE RETURNED CARD IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note calendar for delivery and return of objects carefully. It is understood that the Museum will have the right to dispose for its own account any entry not called for by the dates listed below.

It is also understood that accepted entries will remain on exhibition until June 10, 1973.

The submission of entries will be construed as acceptance of all conditions printed in the entry information.

Signature writte Janke

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CATEGORY ENTRY ONE	1. Paintings 4. Sculptur	s 2. Graph	ics □3. Photic ➡6. Craf	tography ts
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	GRAPHICS	AND PHOTOGR	APHY ONLY	
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1973	MA	4 S	5+10	None
Notification of	Acceptance		tion	
Type or print name	of artist			
This is your onl	ly receipt t	o claim yo	ur object(s).	
This notification v	will be maile	d to you foll	owing judging.	
CATEGORY 1 1 ENTRY TWO 4				
Medium or Materials				
Title				

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